New Jersey Public Employment Relations Commission

NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	e #				ZIKT TOKIVI		
	SECTION I: Parties	and Term of Con	tracts				
1	Public Employer:	jour of Hamm	roton	county: Atlantic			_
2	Employee Organizati	ion: Municipal L	Hility Dept	Number of Employees in Unit:			
3	Base Year Contract T	erm: 12-31-2	1 606	New Contract Term: 1-1-2018			
	SECTION II: Type o				1.2 1 1 0018) ***	
4	SECTION II: Type of Contract Settlement (please check only one) Contract settled without neutral assistance						
5							
	Contract settled with assistance of mediator						
6	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐						
7	Contract settled with assistance of super-conciliator						
8	If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?						
	Yes No No						
	SECTION III: Salary Base						
	The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.						
	the parties negotiate	the salary increases.					
9	Salary Costs in Base Year \$ 286, 403.00						
10	0 Longevity Costs in Base Year \$ 6,000.00			.00			
11	Total Salary Base \$ 292, 403. UU						
SECTION IV: Salary Increases for Each Year of New Agreement*							
		Year 1	Year 2	Year 3	Year 4	Yea r 5	
12	Effective Date (month/day/year)	1-1-2018	1-1-2019	1-1-2020	1-1-3021		
13	Cost of Salary No	21176	0.020			<u></u>	
1.4	Increments (\$) Steps	2.43%	2.25%	2.25%	2.75%		
14	Salary Increase Above Increments (\$)						****
15	Longevity Increase (\$)	:00	.00	.00	100.00		
16	Total \$ Increase (sum of lines 13-15)						
17	New Salary Base (\$)	335 173.00	272,604.00	27(1-27 (2)	no! 11.7 (n)	4	
18	Percentage increase			278,737.00	286,403.00		_
	over prior year ಾಂಗ ರ%	2.43 %	1 187 %	0 %	<u>,50</u> %		_%
	*If contract duration is longer than five years, please add an additional page.						
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Empl	over: Town of H	tamonton	Employe	e Organization:	Municipal	Whilip &	ent Pag	e 2
	SECTION V: Increa	ses in Other Contr						
19	Item Description			<i>Year 2</i> Increase (\$)	Year 3 Increase (\$)	<i>Year 4</i> Increase (\$)	Year 5 Increase (\$)	
	Education	2,300.00	26000	2300.00	2300.00	230000	merease (\$)	_
		1 Employ	lec retiring	1-1-19		·		_
								=
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]		=
								=
20	Totals(\$):							<i>=</i>
	*If contract duration i	is longer than five yed	ars, please add	an additional pa	ge.			
	SECTION VI: Medic	al Costs						_
				Base Year	Year 1			
21	Health Plan Cost			\$ 76,545	96 \$ LA,58	1.24		
22	Prescription Plan Cost			\$ 21346.	86 \$ 19,40	٠.ك		
23	Dental Plan Cost			\$ 3,00M.	76 \$ 2765	. 28		
24	Vision Plan Cost			\$ 1205.5	52 \$ 10LA.	54		
25	Total Cost of Income	_		1/10/103	20 . (12 000	220		

		Base Year Year 1
21	Health Plan Cost	\$ 76,545.96 \$ 6,587.24
22	Prescription Plan Cost	\$ 21,346.86 \$ 19,406.24
23	Dental Plan Cost	\$ 3,004.96 \$ 2,765.08
24	Vision Plan Cost	\$ 1205.52 \$ 1019.54
25	Total Cost of Insurance	\$ 102, 123.30 \$ 92, 828.32
26	Employee Insurance Contributions	\$ 20,367.97 \$ 18,516.34
27	Employee Contributions as % of Total Insurance Cost	20 % 20 %
		Base health 1 Bx estimated at 10% increase

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Revised 8/2016

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